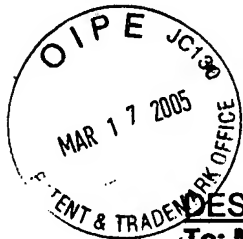Attention: Doug Lindsey.
Finance Office

ITN $

BEIZHAN LIU

DESC -05-USPTO-001   **Date:** 03/02/2005   **Pages: 1/1**

To: Ms. Tyson Laticia S.
Legal Instruments Examiner
Organization TC2600 Room PK2
United States Patent And Trademark Office
P.O.Box 1450 Alexandria VA 22313-1450, USA.

Re: Patent Application: 10/662,466

Dear Ms. Tyson Laticia S.,

I hope you have received my letter dated on March 1, 2005. However, I was told that the check I sent to you can only be used in Canada. So I include a new check of USD230 for paying the related fee as you mentioned in your letter dated on Feb. 10, 2005. The first check can be cut without return. The revised amendment will be sent to you separately.

Thank you for your help.

Best Regards,

Bejhan Liu

Beizhan Liu
204-530 Kingston Road
M4L 1V4, Toronto, Canada
Tel/Fax: 416-6864349; Email: ideasway@yahoo.ca

UNITED STATES PATENT AND TRADEMARK OFFICE

MAR 17 2005
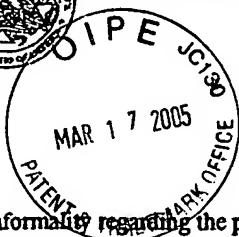
Paper No.

NOTICE OF FEE DEFICIENCY

The information regarding the payment of the fee is indicated below in connection with

☑ the original filing of the application and/or preliminary amendment (e.g. additional claim fees)

☐ the reply filed on _____ . The reply is not fully responsive to the prior Office action
because of the _____
following matter(s). See 37 CFR 1.111 and 37 CFR 1.135.

FEE(S) DUE

☐ 1. The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No. _____
are insufficient to cover the entire fee due. The balance* is due within the time period set below.

☐ 2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due
to
Account _____ (**Card type + last 4 digits ONLY**) was refused.
The balance* is due within the time period set below.

☐ 3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a
Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record.
Remittance or authorization is due within the time period set below.

☑ 4. The filing fee of $ _____ submitted in this application is insufficient.
A balance of $230.00 is due for presentation of excess claims (37 CFR 1.16(b) & (c)).

☑ 5. Other. Multiple dependent claims originally filed on 09-16-03 - $140.00
Total claims over 20 filed on 09-16-03 - $90.00

Explanation (*Provide specific details of the required correction in order to assist the applicant. Indicate whether a service
charge has been added to the fee due*):

APPLICANT IS GIVEN A TIME PERIOD OF **ONE (1) MONTH or THIRTY (30) DAYS** FROM THE MAILING DATE
OF THIS **NOTICE**, WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FE~ ~~ ~ IN ORDER TO
AVOID ABANDONMENT. EXTENSIONS OF THIS TIME PERIOD MAY BE GRANTED UNDER 37 CFR 1.136.

THE INDICATED AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE YEARLY ON OCTOBER 1
(37 CFR 1.16 & 1.21). THE **AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE
REPLY IS RECEIVED BY THE OFFICE** (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS NOT NECESSARILY
THE FEE INDICATED ABOVE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE
WHICH IS POSTED ON THE USPTO'S WEBSITE AT: **http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm**

*Service Charges: There is a $50 service charge for processing each payment refused (including a check returned
"unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a $25.00 service charge for each month
when the balance of a deposit account is below $1000 at the end of the month (37 CFR 1.21(b)(2)).

Legal Instruments Examiner (LIE) or Clerk of Group

Inquires regarding this Notice should be addressed to the above at 703-308-9043 (insert Phone Number).

03/23/2005 HGUTEHA1 00000026 10662466   180.00 OP
                                                          50.00 OP
01 FC:2203
02 FC:2202

Application or Docket Number
10/662466
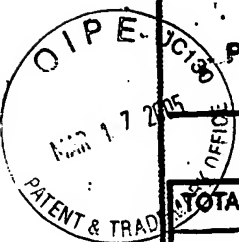
PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	33	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	33 minus 20=	13
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT		✓

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ✓		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X$ 9=	117.7	OR	X$18=	
X42=	0	OR	X84=	
+140=	140.0	OR	+280=	
TOTAL	632	OR	TOTAL	

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.